Sheet No.

Box No. VIII (iv) DECLARATION: INVENTORSHIP (only for the purposes of the designation of the United States of America)

The declaration must conform to the following standardized wording provided for in Section 214: see Notes to Boxes Nos, VIII, VIII (i) to (v) (in general) and the specific Notes to Box No, VIII (iv). If this Box is not used, this sheet should not be included in the request.

Declaration of inventorship (Rules 4.17(iv) and 51bis.1(a)(iv))

or
nt
ns iy, de ed ea,
oy Ie
ef so ul
 ie ie
•

This declaration is continued on the following sheet, "Continuation of Box No. VIII (iv)".

Continuation of Box No. VIII (i) to (v) DECLARATION

If the space is insufficient in any of Boxes Nos. VIII (i) to (v) to furnish all the information, including in the case where more than two inventors are to be named in Box No. VIII (iv), in such case, write "Continuation of Box No. VIII ..." (indicate the item number of the Box) and furnish the information in the same manner as required for the purposes of the Box in which the space was insufficient. If additional space is needed should not be included in the required.

Continuation of box no. VIII(iv)

Name: LAGASSE, Michael J. Residence: Nahant, MA, USA

Mailing Address: 6 Nautical Lane, Nahant, MA 01908 USA Citizenship: US

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are require

POWER OF ATTORNEY CORRESPONDENCE ADDRESS INDICATION FORM

red to respond to a collection of info	mation unless it displays a valid OMB control number.
Application Number	
Filing Date	AUAUST 15, 2006
First Named Inventor	YOUNG
Title	LASER Autocalloration
Art Unit	
Examiner Name	
Attorney Docket Number	060- DZUC1

I hereby revoke a	all previ	ous powers of attorney g	ven in t	he above-ide	entified applica	ation			
I hereby appoint:		,,,			отшос сррпа				
Practitioners at	ssociated	with the Customer Number:	5	3590)				
Practitioner(s)	named be	elow:							
		Name			Registrati	on Number			7
		,	· ·			·			1
									1
									1
									-
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and									
Please recognize or o	hange th	e correspondence address for t	bo show	idontificad oi - F					
					cation to:				
OR	assuciai	ed with the above-mentioned C	ustomer t	Number:		1			
The address	The address associated with Customer Number: 53590								
Firm or						}			
Individual Address	Name								
City				State		l Z	ip		
Country Telephone									
I am the:				Email					
Applicant/Inv	entor.								
Assignee of a Statement ur	ecord of der 37 C	the entire interest. See 37 CFR FR 3.73(b) is enclosed. (Form	3.71. PTO/SB/5)6)					
		SIGNATURE of			of Record			i	···········
Signature			BA			Date	04/	50/35	
Name		TRIFONOV	111	1	1 1	elephone	1	0000	
Title and Company	itle and Company Vice-President & Chief Scientist, MagiQ Technologies, Inc.								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
*Total of		forms are submitted.							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

10/589419 IAP11 Rec'd PCT/PTO 15 AUG 2006

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)					
Applicant/Patent Owner: YOUNG, Jonathan: VIG, Harry: LAGASSE, Michael J.					
Application No./Patent No./Control No.:	Filed/Issue Date: <u>AUGUSt 15, 2006</u>				
Entitled: LASER AUTOCALIBRATION FOR QKD SYSTEMS					
MAGIQ TECHNOLOGIES, INC.					
(Name of Assignee) states that it is: 1. the assignee of the entire right, title, and interest; or	(Type of Assignee: corporation, partnership, university, government agency, etc.)				
2. an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is					
in the patent application/patent identified above by virtue of either	er:				
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or a true copy of the original assignment is attached. OR					
B. A chain of title from the inventor(s), of the patent applicati	ion/patent identified above, to the current assignee as follows:				
From: To: The document was recorded in the United States F Reel, Frame	Patent and Trademark Office at				
2. From:	_, or for which a copy thereof is attached.				
Reel, Frame					
Additional documents in the chain of title are listed on a	a supplemental sheet.				
As required by 37 CFR 3.73(b)(1)(i), the documentary evident assignee was, or concurrently is being, submitted for record [NOTE: A separate copy (i.e., a true copy of the original assignish Division in accordance with 37 CFR Part 3, to record the 302,08]	dation pursuant to 37 CFR 3.11.				
The undersigned (whose title is supplied below) is authorized to Signature	act on behalf of the assignee. 8/14/06 Date				
JOSEPH E. GORTYCH	941-378-2744				
Printed or Typed Name	Telephone Number				
ASSIGNEE'S AUTHORIZED REPRESENTATIVE Title	<u> </u>				

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.